



# THE SCOTTISH OFFICE

## National Health Service in Scotland Management Executive

**NHS Circular:  
MEL(1992) 66**

St. Andrew's House  
Edinburgh EH1 3DE

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Dear Colleague

### **DISPOSAL OF PATIENTS' UNWANTED MEDICINES COLLECTED BY COMMUNITY PHARMACISTS IN SCOTLAND**

5 November 1992

#### Summary

1. On 7 September the Minister announced that funds would be made available to promote local schemes for the safe disposal of patients' medicines collected by community pharmacists. This letter advises Health Boards of the need to have schemes in place by 27 November.
2. The total full year funding for such schemes will be £90,000 and each Health Board's allocation for the period 1 December 1992 to 31 March 1993 and other information is set out in the Annex.

#### Action

3. To enable the Minister to launch this initiative and so that SOHHD can allocate funding, Health Boards should proceed to have their schemes in place. Written confirmation that the Board has a scheme in place should be sent by 27 November to Mr J Stirling, Scottish Office Home and Health Department, Rm 31A, St Andrew's House, Edinburgh EH1 3DE.
4. This letter should be copied to Unit General Managers for information.

Yours sincerely

W SCOTT  
Chief Pharmacist

#### Addressees

##### For action:

General Managers,  
Health Boards  
Chief Administrative  
Pharmaceutical Officers

##### For information:

General Manager,  
Common Services Agency

General Manager,  
State Hospital

General Manager  
Health Education Board  
for Scotland

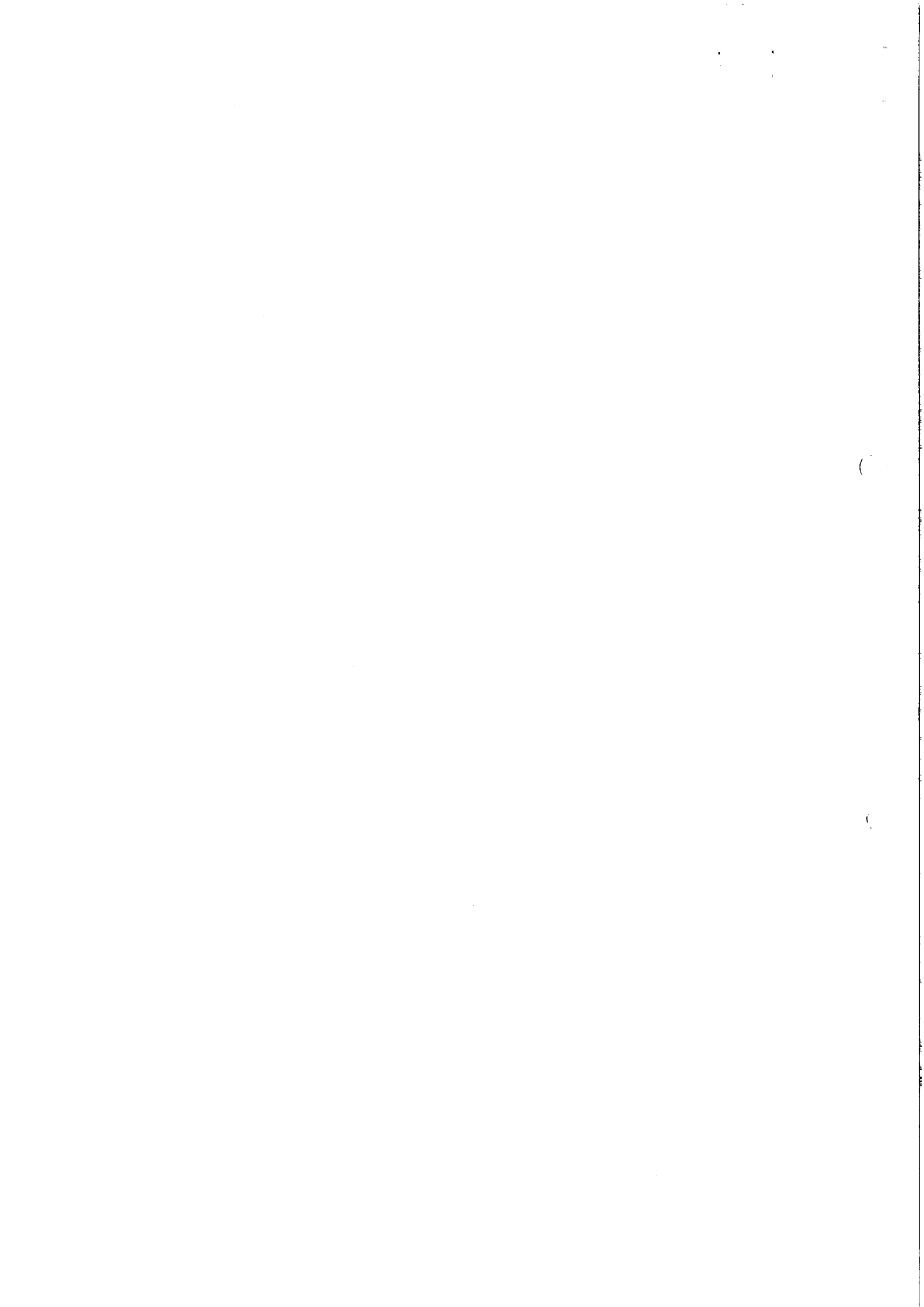
Chief Executives and  
Chief Executive  
Designate, NHS Trusts  
Estates Officers.  
To be copied to Unit  
General Managers for  
information.

#### Enquiries to:

Mr J M Stirling  
SOHHD  
HPPHD4-1  
Rm 31A  
St Andrew's House  
Edinburgh  
EH1 3DE  
Tel: 031-244 2524  
Fax: 031-244 2683

#### Further copies from:

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COMMUNITY PHARMACISTS IN SCOTLAND**

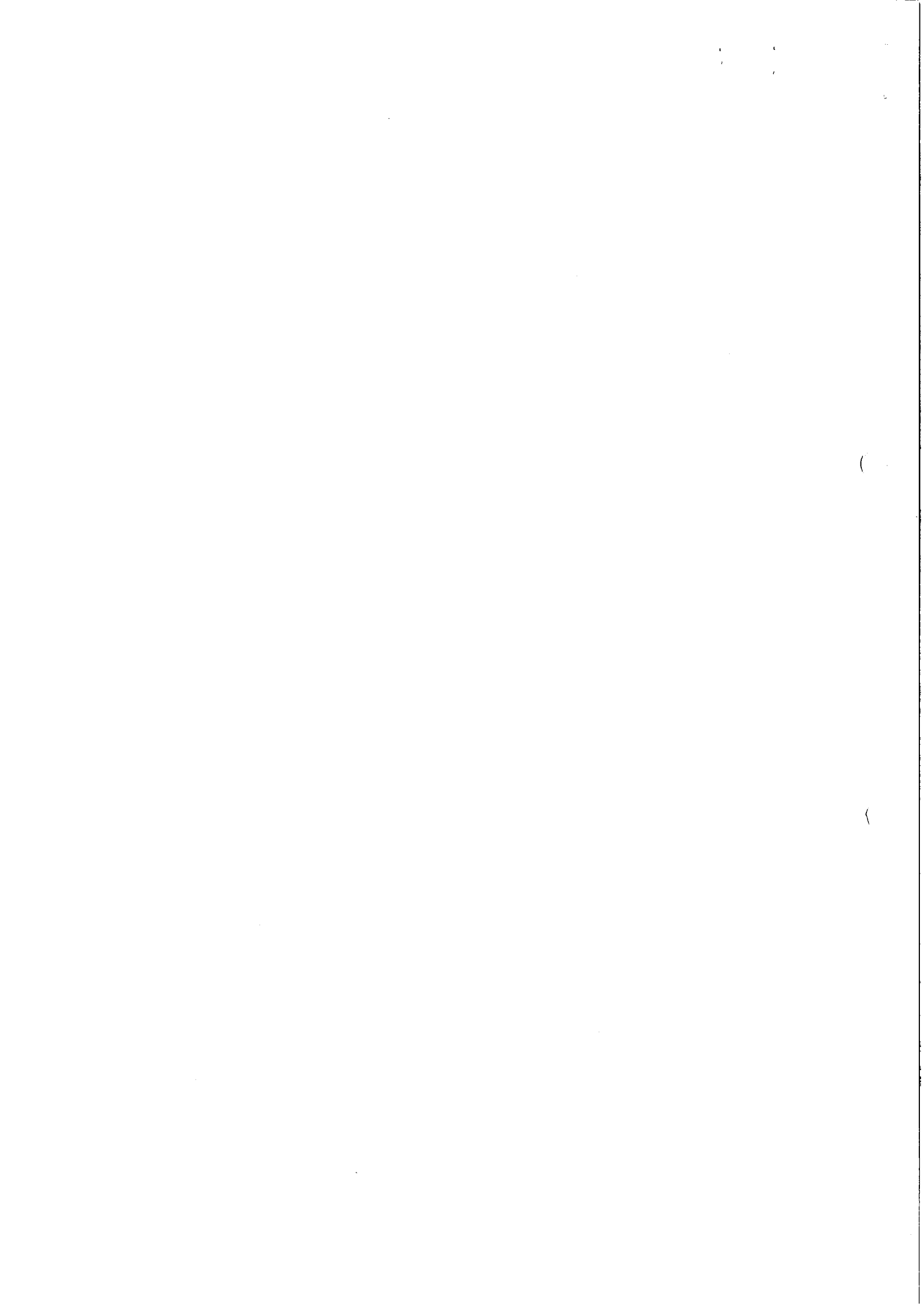
In promoting schemes for the uplift and disposal of patients' unwanted medicines Health Boards can use their own facilities or arrangements can be made with a private contractor. Copies of schemes prepared by Fife and Lothian Health Boards are attached for information.

Community pharmacists will be familiar with the need for contact with the waste disposal arms of the district and islands councils over the regulation of waste disposal by private contractors. Unwanted "prescription only" medicines disposed of via community pharmacies are "special waste" in terms of the Control of Pollution (Special Waste) Regulations 1980 as indeed are waste laboratory chemicals, pharmaceutical compounds and veterinary compounds. These Regulations set requirements for documentation of the transfer of such waste upon the parties involved in its storage, transport and disposal. [The principal form of documentation is the completion of a consignment note.] More general requirements of duty of care, registration of carriers and disposal licensing apply also in ways which can be described by the district and islands councils.

Clearly it will be crucial in any arrangements to forge the right links with those concerned with waste management to ascertain the degree of detail required and to avoid any duplication of paperwork. It will be in the interest of all concerned to ensure that a balance is maintained between proper regulation and the imposition of excessive and unnecessary burden upon pharmacists. The requirements to complete consignment notes should not be allowed to impede the safe and easy disposal of waste medicine. For example while community pharmacists will be able precisely to describe the waste materials that they themselves send for final disposal, it would be reasonable for returned domiciliary medicines to be described as such when precise identification or analysis by the pharmacists is not reasonably practicable.

The issue of medicines returned from households to community pharmacists has been the subject of consultation by the Scottish Office Environment Department. In the context of licensing of waste management operations, local authorities and others were consulted in August 1992 on the origins of returned medicines with a view, possibly, to exempting returned domiciliary medicines from the requirement to have a waste management licence. The outcome will be made known in due course.

The funding allocated to each Health Board for start-up costs and for the period 1 December 1992 to 31 March 1993 solely for schemes for disposal of unwanted medicines collected by community pharmacists is as follows:



	Allocation			£
	Start-Up	for the	Combined	Annual
	Costs	period	Total	Funding
	1/12/92-31/3/93			
Argyll and Clyde	3,250	2,600	5,850	7,800
Ayrshire and Arran	2,750	2,200	4,950	6,600
Borders	750	600	1,350	1,800
Dumfries and Galloway	1,084	866	1,950	2,600
Fife	2,541	2,034	4,575	6,100
Forth Valley	1,400	1,600	3,000	4,000
Grampian	3,750	3,000	6,750	9,000
Greater Glasgow	6,875	5,500	12,375	16,500
Highland	1,459	1,166	2,625	3,500
Lanarkshire	4,125	3,300	7,425	9,900
Lothian	5,458	4,367	9,825	13,100
Orkney	145	117	262	350
Shetland	166	134	300	400
Tayside	2,895	2,317	5,212	6,950
Western Isles	250	200	450	600

